

# Relationship between Resilience and Psychological Wellbeing of In-School Adolescents in Adentan Municipality, Ghana.

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DOI: <https://dx.doi.org/10.47772/IJRISS.2024.807175>

Received: 27 June 2024; Revised: 20 July 2024; Accepted: 25 July 2024; Published: 14 August 2024

## ABSTRACT

Resiliency has been linked with positive mood and general wellbeing among young people. This study examined the relationship between resilience and psychological wellbeing of in-school adolescents in Adentan Municipality, Ghana. The quantitative approach was adopted for the study and the design for the study was the descriptive cross-sectional survey. A sample of 350 in-school adolescents were selected using proportional stratified random sampling for the study. Data were collected using questionnaire made up of the Brief Resilience Scale and the Adolescent Wellbeing Scale. Means, standard deviations and simple linear regression were used in analysing the data. The results showed that the respondents had low level of resilience. Similarly, it was found that the level of psychological wellbeing of the respondents was generally low. Finally, the study revealed that resilience had a significant impact on psychological wellbeing. School counsellors should collaborate with teachers and carry out assessment for at-risk students to find out those who have low resilience and psychological wellbeing so that assistance can be provided for such students. It was recommended that school counsellors in senior high schools organize guidance programmes for students on the subject of being resilient. This can help improve the resilience levels of students and thereby improve their psychological wellbeing.

**Keywords:** Resilience, Psychological Wellbeing, Relationship, In-School Adolescents

## INTRODUCTION

The period of adolescence is that of transition in a child's life and involves a lot gains such as achieving some sense of maturity (World Health Organisation, 2012). This is a period of tremendous development, discovery, and risk-taking as they seek to find who they truly are by putting their talents and abilities to the test. Adolescence confers an increased vulnerability, providing a fertile ground for the emergence of psychological and mental health issues (Blakemore, 2019; Jörns-Presentati et al., 2021). Adolescents face several crises which have the tendency to affect their general lives (Richardson et al., 2020). In the face of these crises, adolescents require a resilient attitude.

Resilience is defined as an individual's ability to use personal and social resources to maintain psychological well-being in the face of stress and adversity (Davydov et al., 2010). Resilience is also seen as the capacity of an individual to cope and recover from adversity, trauma, or significant pressures (Masten, 2014). It involves utilizing both internal and external resources to maintain psychological equilibrium and effectively handle challenges. Resilient people exhibit flexibility, perseverance, and optimism in the face of adversity, enabling them to thrive despite adverse circumstances (Southwick et al., 2014). Resiliency has been linked with positive mood, positive self-esteem, feeling of self-efficacy, secure relationships (Folke et al., 2010; Smith et al., 2010).

According to Sivakumar, Manoj and Divya (2022), resilient people are able to look at negative situations realistically, but in a way that does not center on blame or brooding over what cannot be changed. Instead of viewing adversity as insurmountable, reframe thoughts to look for small ways to tackle the problem and make changes that will help. Resilience can help individuals adapt to stress and cope with difficult situations more effectively, which in turn can reduce anxiety levels. This suggests that the presence of resilience is an important factor for psychological wellbeing of individuals.

Psychological wellbeing entails a sense of optimism, confidence, happiness, clarity, vitality, self-worth, achievement, having a meaning and purpose, engagement, having supportive and satisfying relationships with others, understanding oneself, and responding effectively to one's emotions (Weare, 2015). Adolescents who are well psychologically can develop mentally, emotionally, intellectually, and spiritually; they demonstrate good behaviours; initiate and sustain mutually satisfying personal relationships; use and enjoy solitude; understand others and empathize with them; resolve problems and setbacks and learn from them (The Mental Health Foundation, 2005).

Theoretically, Ryff's psychological wellbeing theory indicates that psychological well-being encompasses a broader range of factors that contribute to an individual's overall mental health and life satisfaction. The architecture of psychological well-being does not only relate to happiness and feeling well but also to experiencing positive emotion, engagement, relationships with others, life meaning and achievement (Seligman, 2011).

Further, according to Huppert and So (2013), psychological well-being is being able to feel good about one self and to be able to function effectively which involves having a sense of control over one's life, to be able to exploit one's potential, having a sense of purpose in life and experiencing positive relations with others. It has been found that secure attachment with parents, healthy peer relationships and a protective social environment help the person to resolve the problems with confidence; also develops various self-competencies as social-emotional and cognitive skills (Appleyard et al., cited in Dey & Daliya, 2019). Thus, resilient behaviour significantly contributes in psychological well-being of individuals that lead them to cope effectively with various situational contexts of life (Fredrickson et al. cited in Yıldırım & Arslan, 2022).

Globally, previous research has supported that resilience has a positive impact on a wide range of mental health and well-being outcomes (Arslan, 2019; Yıldırım & Belen, 2019; Yıldırım & Çelik Tanrıverdi, 2020; Hu, Zhang & Wang, 2015; McDonnell & Semkovska, 2020). Resilience has also been positively linked with wellbeing and mediated the relationship between coping strategies and wellbeing (Tomás et al., 2012). Although resilience has been associated with psychological outcomes and psychological wellbeing, the majority of previous studies were conducted in the United States or other Western countries (Davydov et al., 2010; Rosenberg et al., 2014; Temprado Albalat et al., 2020).

In Africa and Ghana, specifically, there is a dearth of literature on the relationship between resilience and psychological wellbeing. In spite of this, adolescents and young adults constitute the majority of the population in sub-Saharan Africa (Patton et al., 2016), and have an elevated risk for psychological disorders. On this basis, examining the impact of resilience on psychological wellbeing of in-school adolescents is essential. In the Adentan Municipality, adolescents in senior high schools are constantly faced with several difficulties that they have to manage. These include academic struggles, family challenges and even challenges with friendships. The study therefore seeks to examine the relationship between resilience and psychological wellbeing of in-school adolescents in the Adentan Municipality. Three research questions are answered in the study. They are:

1. What is the level of resilience of among in-school adolescents in the Adentan Municipality?
2. What is the level of psychological wellbeing among in-school adolescents in the Adentan Municipality?
3. What is the relationship between resilience and psychological wellbeing of in-school adolescents in the Adentan Municipality?

## LITERATURE REVIEW

Literature relating to the study are reviewed in this section. It covers the theoretical framework, conceptual review and empirical review.

### Theoretical Framework

Ryff's Theory of Psychological Well-Being is reviewed as the theoretical framework of the study. The detailed review is done below:

#### Ryff's Theory of Psychological Well-Being

The Theory of Psychological Well-being was propounded by Ryff (1989). Ryff's theory is founded on the premise that psychological well-being represents an individual's optimal psychological functioning and experience. The theory thus postulates that one's level of psychological wellbeing is dependent on how effectively they manage the ups and downs of life.

The theory of Ryff views psychological wellbeing from two perspectives. These are positive functioning perspective and the emotional perspective. Positive functioning focuses on human development and the challenges that come along with it while emotional perspective views psychological well-being from the traditional sense, thus, absence of psychological distress (Magyar-Moe, Owens & Conoley, 2015).

From the perspective of positive functioning, Ryff et al. cited in Magyar-Moe et al. (2015) argued that psychological wellbeing emerged from developmental, psychological, humanistic theories and existential philosophy. Those theories saw psychological well-being as eudemonia which reflected in a person's ability and perception to deal with or face life's challenges that resulted in the person's positive functioning. Thus, according to Ryff cited in Sayed, Malan, and Fourie (2024), people's well-being is influenced by their life experiences and their interpretations of those events.

On the other hand, the emotional perspective views psychological wellbeing a state where psychological distress is absent (Yıldırım & Arslan, 2022). In this sense, Ryff cited in Sayed et al. (2024) concluded that when psychological distress is absent, there would be decrease in anxiety or depressive symptoms that would result in improved psychological well-being.

Theory of Psychological Well-Being is also known as the six-factor model of psychological wellbeing. This is because the theory identifies six factors or elements which can contribute to the psychological wellbeing of individuals (Seifert, 2005). Ryff (2013) indicated that these factors or dimensions are: Autonomy; Purpose in life; Personal growth; Environmental mastery; Positive relations with others and self-acceptance. According to Ryff, whether an individual experiences psychological wellbeing or not, depends on these six factors or dimensions. These are discussed below:

**Autonomy:** This factor explains that psychological wellbeing is connected to a person's feeling or sense of independence. This factor thus depicts that the extent to which an individual is independent, self-determined, resists pressure from outsiders and have internally regulated behaviour and standards can make

the individual experience psychological wellbeing (Ryff, 2013).

**Purpose in life:** This factor speaks of having a sense of purpose or direction in life. Ryff explained that people who have a strong sense of direction in life and believe that they have a purpose to accomplish in life usually have greater psychological wellbeing (Ryff, 2013).

**Personal growth:** This factor speaks of the extent to which a person has a sense of continual progress, views himself as growing, opened to novel experiences, has a feeling of achieving his or her potential and perceives advancement in his or her life and behaviour over time (Ryff, 2013).

**Environmental mastery:** Environmental mastery describes the degree to which a person has a strong sense of competence and command in managing his or her immediate environment and external activities (Ryff, 2013). Thus, the person who is not making the use of opportunities in his or her environment is likely to have lower or poor psychological wellbeing.

**Positive relations with others:** In the view of Ryff, positive relations with others involve the extent to which a person has warm and trusting relationship with other people and is satisfied by those relationships (Ryff, 2013). Relationships that are built on trust and on a strong communication system also enhance positive relations (Ryff & Keyes, cited in De Caroli & Sagone, 2016).

**Self- acceptance:** When an individual possesses good attitude towards self, accepts and acknowledges different aspects of himself or herself as either good or bad, he or she is likely to have high psychological wellbeing (Ryff, 2013).

In this study, the six factors of psychological wellbeing which are: autonomy; personal growth; environmental mastery; purpose in life; positive relations with others and self-acceptance have a bearing to key aspects of the current study. For adolescent, having a sense of freedom, making something out of your life, control over external events, knowing your purpose, relating well with others and having good view of self are important. These elements can be affected negatively if the individual experiences difficulties that he or she is not able to deal with. In this sense, the ability to be resilient can influence psychological wellbeing of the adolescence.

## Conceptual Review

The main concepts in the study are reviewed in this section.

### Concept of Resilience

Resilience can be viewed as one's ability to "bounce back" or "recovery" from any disturbances, negative life events, resist to illness and flexibility to adapt new situations to maintain their psychological health (Ryff & Singer cited in Yıldırım & Arslan, 2022; Smith et al., 2008). Resilience has also been described as the interaction of the individual with their environment that results in positive adaptation (Masten, 2007; Ungar, 2011, 2018). Essentially, resilience is defined as the human ability to adapt to disaster, adversities, trauma, hardship, or significant sources of stress. Becoming resilient helps individuals use existing resources to cope, resist, and recover in tough situations (Abedini & Joibari, 2023; Foroutan et al., 2023). Some views consider resilience as a response to an event, while others consider it as a sustainable coping style (Byeon et al., 2019; Karami et al., 2017).

Resilience is also seen as a multidimensional concept that is influenced by individual characteristics and environmental factors (Sidheek et al., 2017). In this regard, a person's ability to be resilient is his or her capacity to adapt after a critical situation and this is a unique ability that varies from person to person (Riess, 2021). Resilience is a dynamic and adaptive structure that creates adaptation and improvement of mental

health conditions in critical situations and inappropriate situations (Fonseca, Madeira & Simoes, 2021).

Further, resilience is seen as a complex concept that encompasses several crucial traits necessary for overcoming hardship and preserving mental health. Firstly, it involves the capacity to adjust constructively to adversity while exhibiting adaptability and ingenuity (Farooq & Majeed, 2024). Therefore, resilience is a factor for establishing biological, psychological, and spiritual balance in the face of hazardous conditions (Byeon et al., 2019; Chitra & Karunanidhi, 2021). Characteristics of resilient individuals include experiencing positive emotional and cognitive consequences, self-esteem, optimal social functioning, and resistance against the negative outcomes of adverse life events (Barzilay et al., 2020). Additionally, resilient people can control their emotions, which helps them manage stress and overcome adversity with fortitude (Tugade & Fredrickson, 2004). They remain hopeful and upbeat, considering obstacles as temporary and manageable, which encourages tenacity and resolve (Seligman, 2011).

From the forgoing, it is clear that resilient individuals are usually able to maintain their physical and psychological health and have the competence to recover quickly from stressful events (Dey & Daliya, 2019). In this regard, as the level of resilience increases in people, it can maintain physical and mental health by neutralizing the negative consequences of crises and, on the other hand, improve psychological well-being (Bajaj & Pande, 2016).

### **Psychological Wellbeing**

Since psychological wellbeing is influenced by a wide range of factors, no single view can fully describe the complex concept of psychological wellbeing (Dodge et al., 2012; Huta & Waterman, 2014). Thus, in order to better understand and refine the idea of well-being, researchers and mental health professionals keep studying psychological wellbeing in a variety of populations (Rahmani et al., 2018; Watts et al., 2022). Ryff (2013) elucidates the multifaceted nature of psychological well-being and its potential to be interpreted as positive psychological functioning in her early research on the subject. Achieving one's full potential and leading a healthy life are key components of psychological well-being (Ryan & Deci, 2001).

Hedonic and eudaimonic well-being are the two dimensions that make up psychological well-being. According to Ryan and Deci (2001), Lyubomirsky et al. (2005), and others, hedonic well-being is a subjective feeling primarily associated with pleasure and good experiences. It is focused on experiencing happy emotions and limiting negative emotions. Hedonistic well-being can be attained by satisfying one's immediate needs, such as the need to feel or experience pleasure right now.

Finding meaning and purpose in life is referred to as eudaimonic well-being. This has to do with leading a well-lived life (Baluku et al., 2022) and involves encounters and pursuits that foster psychological well-being, self-actualization, personal meaning, and accomplishment of one's purpose and objectives (Ryff, 2013; Steger et al., 2008; Huta & Ryan, 2010). Aristotle's theories about seeking meaning and purpose are related to these activities or experiences since they lead to a sense of fulfillment, meaning, and flourishing (Ryff, 2013).

### **Empirical Review**

Previous empirical literature relating to the study are reviewed in this section. Xing et al. (2023) explored the developmental pattern of psychological resilience in adolescents and to find the sensitive period for psychological resilience intervention to promote resilience in adolescents. The study measured the psychological resilience of a total of 559 adolescents using the Connor-Davidson resilience scale (CD-RISC) in a high school. It was found that the resilience level of the adolescents decreased in grade 10. Also, Nourian et al. (2016) sought to determine resilience and its contributing factors in high-risk adolescents living in residential care facilities affiliated to Tehran Welfare Organization in order to help develop

effective preventive measures for them. The study was descriptive and focused on 223 adolescents. Data were collected using questionnaire. The results showed that majority of the adolescents had moderate to low resilience levels.

Dey and Daliya (2019) examined the level of resilience and psychological wellbeing among orphan and non-orphan adolescents. The sample comprised 30 orphan and 30 non-orphan adolescents aged 13-18 years. After responding questionnaire, the study found that there is no significant difference in the level of Resilience among orphan and non-orphan adolescents. Also, it was found that there is no significant influence of resilience on psychological wellbeing of orphan adolescents whereas among non-orphan adolescents there was significant influence of resilience on psychological wellbeing.

Further, De Caroli and Sagone (2016) examined resilience and psychological well-being in a sample of Italian middle and late adolescents. Data were obtained from the respondents using questionnaire. It was found that adolescents with self-fulfilling profile reported higher resilience and psychological well-being than the others.

Sayed, Malan and Fourie (2024) used a cross-sectional survey design to examine resilience and overall wellbeing. A convenience sampling technique was employed, including 631 respondents in South Africa. After using questionnaire to collect data, it was found that there was a strong correlation between resilience and overall well-being during the COVID-19 pandemic.

Moreover, Chung et al. (2023) examined the interrelationships among resilience, ways of coping, psychological well-being, and quality of life. Data were collected from 119 respondents using questionnaire. The results showed that participants from single-parent families reported statistically significantly lower levels of resilience and poorer quality of life than those in intact families. It was found that resilience was associated with quality of life. Mesman, Vreeker and Hillegers (2021) carried out a systematic literature review. They found 25 studies that unanimously show that higher levels of resilience are related to fewer mental health problems, despite the heterogeneity of study populations and instruments.

Yıldırım and Arslan (2022) also investigated the associations between resilience, dispositional hope, preventive behaviours, subjective well-being, and psychological health during early stage of COVID-19. The study showed that resilience mediated the relationship between hope and psychological health and subjective well-being. The results also showed that hope, and resilience had significant direct effects on psychological health, and subjective well-being while preventive behaviours did not manifest a significant effect on these two variables except on resilience.

Additionally, Sivakumar, Manoj and Divya (2022) sought to determine the Relationship between psychological well-being and resilience in adolescence and adults. The study was quantitative and as a result data was taken from a convenient sample of 116 participants. Data were gathered using questionnaire and it was found that psychological well-being is influenced by resilience among adolescence and adults.

In Ghana, Adjorlolo, Anum and Huang (2022) examined gender differences in the prevalence of adverse life experiences (ALEs), mental health outcomes and association between ALEs and mental health outcomes of school-going adolescents. A sample of 1,886 adolescents (1,174 females) were involved in the study. It was found that girls report higher mental health problems than boys. Overall, both males and females had poor mental health and wellbeing.

From the review, it appears that even though studies similar to the current study have been carried out in several places, in the Ghanaian setting the situation was different. There was no specific study addressing the impact of resilience on the psychological wellbeing of in-school adolescents. The study of Adjorlolo et al. (2022) focused on adverse life experiences and mental health outcomes among school-going adolescents.

This is the study that came close to assessing similar things to the current study. All of these show that the current study is important for the Ghanaian literature.

## **METHODOLOGY**

### **Research Approach and Design**

The quantitative approach was adopted for the study. According to Babbie (2010), quantitative approach deals with numerical data and inferring the results to entire groups of people to be able to describe and provide meaning to specific phenomena. The quantitative approach can be most effectively used for situations where there are a large number of respondents available, where the data can be effectively measured using quantitative techniques, and where statistical methods of analysis can be used (May, 2011). This was appropriate in the current study where I was interested in using statistical analysis to measure relationship between resilience and psychological wellbeing among a large group of people.

Correlational research design was chosen for the study. Correlational research is a type of research used to explore the connection between two variables (Eckel, 2024). In this type of research, the researcher does not interfere with the variables. Instead of manipulating or adjusting them, researchers focus more on observation. In this study, the design was appropriate in determining and describing the relationship between resilience and psychological wellbeing among in-school adolescents in the Adentan Municipality.

### **Population and Sampling**

The target population for this study comprised all students in senior high schools in the Adentan Municipality. There are four senior high schools in the municipality. The accessible population was however made up of Form 1 and 2 students in these four schools. The final year students were excluded because at the time of the data collection, they were writing mock examinations in preparation for their final examinations. The population of Form 1 and 2 students obtained from the four schools was 3,321.

Using Krejcie and Morgan's (1970) Sample Determination Table, a sample of 350 was used for the study. The proportional stratified random sampling procedure was used in selecting the sample. This procedure involves putting the population into strata, which are reasonably homogeneous groups, and then taking random samples from each stratum (Albright, Winston, & Zappe, 2010). Thus, in arriving at the number of adolescents to sample from each of the four schools, stratification was used. Each stratum's size in the sample was equivalent to its size in the larger population. This means that the sample size for each school depended on the size of the school in the main population. Stratification was done to ensure that each of the four schools was appropriately represented in the study. This was the justification for using proportional stratified random sampling. After the stratification, the actual respondents from each school were selected using simple random sampling. This was to ensure that every student had an equal chance of being selected.

### **Data Collection Instrument, Procedures and Analysis**

Questionnaire was used in collection data for the study. The questionnaire was made up of the Brief Resilience Scale (BRS; Smith et al., 2008) used to measure resilience and the Adolescent Wellbeing Scale (AWS; Birlleson, 1980) used to measure psychological wellbeing of adolescents. The BRS was adapted and used to measure resilience in this study. The BRS consists of 6 items, which are rated using a five-point Likert scale response format from 1 (strongly disagree) to 5 (strongly agree). It has three positive items and three negative items. The AWS comprises 18 items scored using a five-point Likert scale response format from 1 (strongly disagree) to 5 (strongly agree) was adapted and used to measure psychological wellbeing in this study.

Face and content validity were established for the two instruments in the study. Also, the Cronbach's alpha ( $\alpha$ ) was used to assess the internal consistency among the items on the questionnaire. In this study, a reliability co-efficient of 0.841 was obtained for BRS while a reliability co-efficient of 0.792 was obtained for the AWS after conducting the reliability analysis. This implies that the instruments were reliable for the study. Pilot testing was done with 40 in-school adolescents who were not part of the main study. These 40 adolescents were selected from Madina Senior High School (MASSEC) which is located in La Nkwantanang- Madina Municipal, the municipal closest to the Adentan Municipality.

Data collection was done after obtaining an introductory letter from the Department of Guidance and Counselling in the University of Cape Coast. The introductory letter was taken to the leadership of the various schools to obtain permission to collect data from the students. I collected the data in person with the help of two teachers from each school. The teachers were given a short training on research and the ethics that should be adhered to before they assisted in the data collection. Permission, informed consent, autonomy, anonymity and confidentiality were the ethical issues addressed in the study. Four weeks were used in the data collection.

In analysing the data, means and standard deviation were used for the research questions one and two. Simple linear regression was used in analysing the data for the third research question. The results were presented using tables, interpreted and discussed in relation to previous literature.

## RESULTS

### Level of Resilience of Adolescents

The study aimed at finding out the level of resilience among the respondents. The scale had both positive and negative statements. The positive statements were scored as: 1=Strongly Disagree, 2=Disagree, 3=Neutral, 4=Agree and 5=Strongly Agree while the negative statements were scored as: 5=Strongly Disagree, 4=Disagree, 3=Neutral, 2=Agree and 1=Strongly Agree. Mean and standard deviation were used to analyze the data. In getting the cut-off point, the average of the scoring scale was used. Thus, scoring (1 to 5) were added and divided by the total number. Therefore, 15 was divided by 5 which gave 3.0 as the cut-off point.

Essentially, mean scores of 3.0 and higher showed high level of resilience while mean scores below 3.0 was showed low level of resilience. Table 1 summarizes the results.

Table 1: Level of Resilience of Adolescents

Statement	Mean	SD
I tend to bounce back quickly after hard times.	2.87	1.06
I have a hard time making it through stressful events.	2.58	0.88
It does not take me long to recover from a stressful event.	2.92	0.91
It is hard for me to snap back when something bad happens.	2.65	0.94
I usually come through difficult times with little trouble.	2.85	0.92
I tend to take a long time to get over set-backs in my life.	2.77	0.95
Mean of Means / Average of Standard Deviation	2.77	0.94

Source: Field survey (2024)

*SD=Standard Deviation*

From Table 1, it can be seen that all the statements had mean scores below 3.0 indicating that there was an



overall low level of resilience. In terms of specifics, it was shown that the statement “It does not take me long to recover from a stressful event” recorded a mean score of 2.92 and standard deviation of 0.91. Since the mean score was below 3.0, it gave the indication that most of the respondents were not in agreement with the statement and as such had low resilience in terms of recovering from a stressful event.

The respondents also had low resilience with regards to bouncing back quickly after hard times ( $M=2.87$ ,  $SD=1.06$ ). The statement “I usually come through difficult times with little trouble” also recorded a mean score below 3.0 ( $M=2.85$ ,  $SD=0.92$ ). Thus, it can be seen that the respondents had low resilience in terms of coming through difficult times. The mean of means score obtained was 2.77 which was below 3.0. This implies that overall, the respondents had low level of resilience. Thus, they do not bounce back quickly after hard times, they have hard time making it through stressful events, takes them long time to recover from stressful events, hard for them to snap back when something bad happens and takes them long time to get over setbacks.

### Psychological Wellbeing of Adolescents

The study sought to find out the psychological wellbeing of the respondents. The scale had both positive and negative statements. The positive statements were scored as: 1=Strongly Disagree, 2=Disagree, 3=Neutral, 4=Agree and 5=Strongly Agree while the negative statements were scored as: 5=Strongly Disagree, 4=Disagree, 3=Neutral, 2=Agree and 1=Strongly Agree. Mean and standard deviation were used to analyze the data. In getting the cut-off point, the average of the scoring scale was used. Thus, scoring (1 to 5) were added and divided by the total number. Therefore, 15 was divided by 5 which gave 3.0 as the cut-off point.

Mean scores of 3.0 and higher showed high level of psychological wellbeing while mean scores below 3.0 was showed low level of psychological wellbeing. The results are shown in Table 2.

Table 2: Level of Psychological Wellbeing of Adolescents

Statement	Mean	SD
I look forward to things as much as I used to	2.89	0.92
I sleep very well	3.54	0.97
I feel like crying	2.52	1.02
I like going out	3.08	0.94
I feel like leaving home	2.77	0.99
I get stomach-aches	3.07	1.01
I have lots of energy	2.92	0.93
I enjoy my food	3.25	0.89
I can stick up for myself	2.60	0.96
I think life isn't worth living	3.22	0.99
I am good at things I do	2.88	0.90
I enjoy the things I do as much as I used to	3.08	0.85
I like talking to my friends and family	2.93	1.01
I have horrible dreams	2.75	0.95
I feel very lonely	2.54	1.01
I am easily cheered up	2.66	0.94
I feel so sad I can hardly bear it	3.00	0.89

I feel very bored	2.57	0.99
Mean of Means / Average of Standard Deviation	2.90	0.95

Source: Field survey (2024)

*SD=Standard Deviation*

Table 2 shows that overall, with a mean of means score of 2.90, the level of psychological wellbeing of the respondents was low. This is because it is lower than the cut-off score of 3.0. In terms of specifics, the psychological wellbeing of the respondents was high in a few situations and low in most situations. The statement “I sleep very well” had the highest mean score (M=3.54, SD=0.97) followed by “I like going out” (M=3.08, SD=0.94), and “I enjoy the things I do as much as I used to” (M=3.08, SD=0.85). Since all of these were above 3.0, the implication is that respondents had high psychological wellbeing regarding these issues.

On the hand, statements like “I feel like crying” (M=2.52, SD=1.02), “I feel very lonely” (M=2.54, SD=1.01), “I feel very bored” (M=2.57, SD=0.99), “I can stick up for myself” (M=2.60, SD=0.96) all had mean scores below 3.0 indicating low psychological wellbeing. Several other statements had mean scores lower than 3.0. From the results, it is clear that even though in some few situations the psychological wellbeing of the respondents was high, in most cases, the psychological wellbeing was low. Thus, it can be said that the respondents felt like crying, felt very lonely, felt very bored, could not stick up for themselves, were not easily cheered up and felt like leaving home.

### Relationship between Resilience and Psychological Wellbeing of Adolescents

The study sought to find out how resilience was related to psychological wellbeing of the respondents. Simple linear regression was carried out in seeking to meet this objective. The predictor variable was resilience while the dependent variable was psychological wellbeing. The results are presented in Table 3.

Table 3: Regression Analysis of Resilience and Psychological Wellbeing

Model	Unstandardized Coefficients		Standardized Coefficients	T	Sig.	
	B	Std. Error	Beta			
1	(Constant)	33.812	.382		88.520	.000
	Resilience	.169	.026	.334	6.531*	.000
a. Dependent Variable: Psychological Wellbeing						
b. Predictors: (Constant), Resilience						
c. $F(1, 349)=42.654***, p<.000, R^2=.112, r=.504, n=350, p=.000$ .						

Source: Field survey (2024)

In Table 3, it can be seen that resilience is significantly connected to psychological wellbeing (t=6.531, p<.05). The Pearson correlation value (r=.504) was significant with a p-value of .000. This means that the relationship between the two variables was significant. The F-statistic from the ANOVA test was also significant [F (1, 349) =42.654, p<.05] implying that the regression model was significant. The R<sup>2</sup> value of .112 gives the indication that the predictor variable (resilience) contributed 11.2% to the variation in the dependent variable which is psychological wellbeing (R<sup>2</sup>=.112 X 100=11.2%). From the results, it is clear that the relationship between resilience and psychological wellbeing was significant.

## DISCUSSION

The study showed that the respondents had low level of resilience. This was evident in the fact that they did not bounce back quickly after hard times, they had hard time making it through stressful events, it took them long time to recover from stressful events, was hard for them to snap back when something bad happens and took them long time to get over setbacks. The results are in line with those of Xing et al. (2023) the resilience level of the adolescents decreased in grade 10 of high school. Thus, Xing et al. confirmed that adolescents are most likely to have low level of resilience because of the numerous issues they are faced with. In a similar vein, Nourian et al. (2016) found in their study that majority of adolescents had moderate to low resilience levels.

The current study found also that the level of psychological wellbeing of the respondents was generally low. The respondents noted that there were times they felt like crying, felt very lonely, felt very bored, could not stick up for themselves, were not easily cheered up and felt like leaving home. The results are in agreement with those of Adjorlolo, Anum and Huang (2022) that school-going adolescents in Ghana generally had poor mental health and wellbeing. In the Ghanaian system, adolescents face several adverse life events but they do not get the needed support attention. This could explain the poor psychological wellbeing.

Finally, the current study revealed that the relationship resilience and psychological wellbeing was significant. The results imply that the level of resilience could significantly affect the psychological wellbeing of adolescents. The predictive relationship was positive implying that if resilience is low then psychological wellbeing is likely to be low and if resilience is high then psychological wellbeing is likely to be high. The results are consistent with the results of Sivakumar, Manoj and Divya (2022) which showed that psychological well-being is influenced by resilience among adolescence and adults. Similarly, Dey and Daliya (2019) revealed that among non-orphan adolescents there was significant influence of resilience on psychological wellbeing. Ryff's Psychological Wellbeing theory was confirmed by the findings as the theory notes that the overall experiences of individuals can influence their psychological wellbeing.

## CONCLUSIONS

From the results of the study, it is concluded that in-school adolescents in the Adentan Municipality had low level of resilience. This gives the indication that their ability to withstand hard and difficult situations was low. This would mean that adolescents may need more support to be able to deal with difficult situations they may encounter.

It is also concluded that in-school adolescents in the Adentan Municipality had low level of psychological wellbeing. This meant that generally, they were not psychologically sound and were not happy with their lives as a whole. Finally, it is concluded that the level of resilience of in-school adolescents in the Adentan Municipality can determine to a large extent their level of psychological wellbeing. Thus, connection between resilience and psychological wellbeing is established in the current study.

## RECOMMENDATIONS

The following recommendations are made on the basis of the findings of the study:

1. Teachers, parents and peers should provide support for adolescents whenever they are having difficulties in school. This can help the adolescents build up some resilience to their personal struggles.
2. School counsellors should collaborate with teachers and carry out assessment for at-risk students to

find out those who have low resilience and psychological wellbeing so that assistance can be provided for such students.

3. School counsellors in senior high schools should organize guidance programmes for students on the subject of being resilient. This can help improve the resilience levels of students and thereby improve their psychological wellbeing.

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